## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/532023

|                          |  | CLAIMS  | AS FILED   | - PART I                               |             | •                                     |   |                    |                        |    |                         |                        |
|--------------------------|--|---|--|--|-------------|---------------------------------------|---|--------------------|------------------------|----|-------------------------|------------------------|
|                          |  |   | (Colum   |  | (Column 2)  |                                       |   | SMALL EN           | TITY .                 | OR | OTHER<br>SMALL          |                        |
| U.S. NATIONAL STAGE FEES |  |   |  |  |             |                                       |   | RATE               | FEE                    | 7  | RATE                    | FEE                    |
| ва                       | SIC FEE  |   | SMALL EN   | T. = \$ 150                            | LAR         | GE ENT. = \$ 300                      |   | BASIC FEE          | 150                    | OR | BASIC FEE               |                        |
| EXAMINATION FEE          |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$50/\$100 |  |             | ther situations = \$ 100 / \$ 200     |   | EXAM. FEE          | 200                    | 1  | EXAM, FEE               | 1                      |
| SE                       | ARCH FEE                                       |   | U.S. is ISA = ALL other oc \$ 200 / 3            | ountries =                             | All o       | other situations =<br>\$ 250 / \$ 500 |   | SEARCH FEE         | 200                    |    | SEARCH FEE              | <del> </del>           |
| FEE                      | FOR EXTRA                                      | SPEC. PGS.  |  | nus 100 =                              |             | / 50 =                                |   | X \$ 125 =         |                        | 1  | X \$ 250 =              |                        |
| тот                      | TAL CHARGEA                                    | BLE CLAIMS  | 4 m  | inus 20 =                              | *           |                                       |   | X \$ 25 =          | · · · ·                | OR | X \$ 50 =               | <del> </del>           |
| IND                      | EPENDENT CI                                    | AIMS  | 2 minus 3 = .                                    |  |             |                                       |   | X \$ 100 =         |                        | OR | X \$ 200 =              | <del> </del>           |
| MUL                      | TIPLE DEPEN                                    | IDENT CLAIM PR  | ESENT  |  | _           |                                       |   | + \$ 180 =         |                        | OR | + \$ 360 =              |                        |
| * If                     | the difference                                 | e in column 1 is  | less than zen                                    | o, enter "0                            | in co       | olumn 2                               | L | TOTAL              | 450                    | OR | TOTAL                   |                        |
|                          | ٠ ,  | OL AUSSO 40   |  |  |             |                                       |   | <u> </u>           |                        |    |                         |                        |
|                          |  | (Column 1)  | AMENDED  | MENDED - PART II (Column 2) (Column 3) |             |                                       |   | SMALL ENTITY       |                        |    | OTHER THAN SMALL ENTITY |                        |
| AMENDMENT A              |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                             |  | HIGHE<br>NUMB<br>PREVIO<br>PAID F      | BER<br>USLY | PRESENT<br>EXTRA                      |   | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|                          | Total  | *   | Minus  | **                                     |             | =                                     |   | X \$ 25 =          |                        | OR | X \$ 50 =               |                        |
|                          | Independent                                    | *   | Minus  | ***                                    |             | =                                     | ſ | X \$ 100 =         |                        | OR | X \$ 200 =              |                        |
|                          | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |  |             |                                       |   | + \$ 180 =         |                        | OR | + \$ 360 =              |                        |
|                          |  |   |  |  |             |                                       | 7 | FEE                |                        | OR | TOTAL ADDIT.<br>FEE     |                        |
|                          |  | (Column 1)  |  | (Colum                                 | n 2)        | (Column 3)                            |   |                    | _                      |    |                         |                        |
| 볿                        |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                             |  | HIGHE<br>NUMBI<br>PREVIOL<br>PAID F    | ER<br>USLY  | PRESENT<br>EXTRA                      |   | RĄTE               | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|                          | Total  | *   | Minus  | **                                     | ,           | =                                     | Γ | X \$ 25 =          |                        | OR | X \$ 50 =               |                        |
|                          | Independent                                    | *   | Minus  | ***                                    |             | =                                     | ſ | X \$1100 =         |                        | OR | X \$ 200 =              |                        |
|                          | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |  |             |                                       | T | + \$ 180 =         |                        | OR | + \$ 360 =              |                        |
|                          |  |   |  |  |             |                                       | 7 | OTAL ADDIT.<br>FEE |                        | OR | TOTAL ADDIT.<br>FEE     |                        |
| 1                        | If the "Highest Nu                             | mn 1 is less than the<br>mber Previously Paic<br>mber Previously Paic | For IN THIS SP                                   | ACF is less I                          | than '20    | 1' enter "20"                         |   |                    |                        |    |                         |                        |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.